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TRANSMITTAL FORM		(10 Del 3011)	Application Number					
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			First Named Inventor		GRASMUCK, Gilbert			
			Art Unit	GIOAGMIC	ron, Guberi			
			Examiner Name					
(to be used for all correspondence after initial filing)		iling)						
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ENCLOSURES (Check all that apply)								
Fee Transmittal Fo	ırm		Orawing(s)			After A	Mowance Communication to TC	
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Affidavits/declaration(s)			Power of Attorney, Revocation Change of Correspondence Address					
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